PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 CLAIMS AS FILED - PART I

Application or Docket Number
09804 W8
72147 - 9073/0

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			9 40				Γ	RATE	FEE	ı ı	RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			് 🚀 . minus 20=		. 0		ſ	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			2 minus 3 =		0		İ	X40=		OR	X80=	_	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				Ī	+135≂		OR	+270=		
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in d	olumn 2	L	TOTAL		OR	TOTAL	7/0	
CLAIMS AS AMENDED - PART II											OTHER THAN		
		(Column 1)		(Column 2) (Column				SMALL E	NTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 9	Minus	•• (<u> </u>	= 0	L	X\$ 9=		OR	X\$18=		
	Independent	NTATION OF M	Minus	*** C	Z T.CLAIM	= ()		X40=		OR	X80 =		
	THOTTHESE	INTAMOR OF W	OLIN EL DE	LINDEN	I OLAIM			+135=		OR	+270=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)				•	ADDIT: TEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 9	Minus	<	î	= ()		X\$ 9=		OR	X\$18=		
	Independent	NTATION OF M	Minus	PENDEN	Z T CL AIM	= 0		X40=		OR	X80=		
L	TIMOTTRESE	NIAHON OF W	OLIN CE DE	LINDLIN	T OEAIM		' [+135=		OR	+270=		
						•		TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	-	
		(Column 1)			ımn 2)	(Column 3)	a ^				ADDIT. FEL		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 12	Minus	(1	= 0		X\$ 9=	·	OR	X\$18=		
	Independent	. 3	Minus	l c	2	[= <u>()</u>	П	X40=		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or (Independent) is the highest number found in the appropriate box in column 1.													